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**REQUEST FOR WITHDRAWAL
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Application Number	09/472,927
Filing Date	12/27/1999
First Named Inventor	Sivakumar Muthuswamy
Art Unit	3662
Examiner Name	Gravini, Stephen M.
Attorney Docket Number	CM01363L

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: The assignee is taking over prosecution of this application.

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<input type="checkbox"/> Firm or Individual Name					
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Telephone	(847) 576-0741			Fax	(847) 576-0721
Signature					
Name	Frank M. Scutch, III			Registration No.	34,484
Date	December 17, 2004			Telephone No.	(616) 831-1777

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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